_						
	FEE TRANSMITTAL	Complete if Known				
	for FY 2004	Application Number	09/972,756			
		Filing Date	October 5, 2001			
	Effective 10/01/2003. Patent fees are subject to annual revision.	First Named Inventor	Katze, Michael G.			
\boxtimes	Applicant claims small entity status. See 37 CFR 1.27	Examiner Name	Vogel, Nancy T.			
		Art Unit	1636			
TOTAL AMOUNT OF PAYMENT (\$) 185		Attorney Docket No.	021044-008020US			

		FEE CALCULATION (continued)						
Check	3. ADD	ITIONAL I	FEES			· · · · · · · · · · · · · · · · · · ·		
Deposit A	Large	Entity	Small	Entity	_			
Deposit Account	osit		Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
Number	20-1400			130	2051	65	Surcharge - late filing fee or oath	
			1052	50	2052	25	Surcharge - late provisional filing fee or	
Deposit Account	Townsend an	d Townsend and Crew LLP	1053	400	4050	400	cover sheet.	
Name	Townsend and Townsend and Crew LLP			130	1053	130	Non-English specification	
The Director is	s authorized to: (chec	ck all that apply)	1812	2,520	1812	2,520	For filing a request for reexamination	
		Credit any overpayments	1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
		ny underpayment of fee(s)	1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
	• -	ccept for the filing fee	1251	110	2251	55		55
to the above-id	entified deposit accoun		_	420	2251	210	Extension for reply within first month	35
	FEE CA	ALCULATION	1252	420	2252	210	Extension for reply within second month	
1. BASIC	FILING FEE		1253	950	2253	475	Extension for reply within third month	
Large Entity	Small Entity		1254	1,480	2254	740	Extension for reply within fourth month	
Fee Fee		e Description Fee Paid	1					
Code (\$) 1001 770	Code (\$) 2001 385 Ut	ility filing fee	1255	2,010	2255	1,005	Extension for reply within fifth month	
1001 770		esign filing fee	1401	330	2401	165	Notice of Appeal	
1002 540		ant filing fee	1402	330	2402	165	Filing a brief in support of an appeal	
1003 333		eissue filing fee	1403	290	2403	145	Request for oral hearing	
1005 160		ovisional filing fee	1451	1,510	1451	1,510	Petition to institute a public use proceeding	
	SUBTOTAL	(4)	1452	110	2452	55	Petition to revive – unavoidable	-
	SOBIOTAL	(1)	1453	1,330	2453	665	Petition to revive – unintentional	
2. EXTRA (CLAIM FEES FOR	UTILITY AND REISSUE	1501	1,330	2501	665	Utility issue fee (or reissue)	
		Fee from	1502	480	2502	240	Design issue fee	
	Extra C		1503	640	2503	320	Plant issue fee	
Total Claims	-** =	× =	1460	130	1460	130	Petitions to the Commissioner	
Independent			1807	50	1807	50	Petitions related to provisional applications	
Claims Multiple			1806	180	1806	180	Submission of Information Disclosure Stmt	
Dependent		X	8021	40	8021	40		
Large Entity	1002	40	0021	70	Recording each patent assignment per property (times number of properties)			
Fee Fee Code (\$)	Fee Fee Code (\$)	Fee Description	1809	770	2809	385	Filing a submission after final rejection (37 CFR § 1.129(a))	
1202 18	2202 9	Claims in excess of 20	1810	770	2810	385	For each additional invention to be	
1201 86 1203 290	2201 43 2203 145	Independent claims in excess of 3	1.0.0	,,,		000	examined (37 CFR § 1.129(b))	
1203 290 1204 86	2203 145	Multiple dependent claim, if not paid ** Reissue independent claims	1801	770	2801	385	Request for Continued Examination (RCE)	
1205 18	2205 9	over original patent ** Reissue claims in excess of 20	1802	900	1802	900	Request for expedited examination of a design application	
	ı	and over original patent OTAL (2) (\$)	Other fe	e (specify)	ł Termir	nal Disclain	• • • • • • • • • • • • • • • • • • • •	400
	Other fee (specify) Terminal Disclaimer				130			
**or number pr	eviously paid, if greater; I	For Reissues, see above	*Reduc	ed by Basic	c Filing I	Fee Paid	SUBTOTAL (3) (\$)185	

SUBMITTED BY Complete (if applicable)								
Name (Print/Type)	Annette S. Parent	Registration No. (Attorney/Agent)	42,058	Telephone	415-576-0200			
Signature	Monette	1 Parent		Date	1/28/04			

OFE 1CTORES

Image

B/21 (08-03)

Filing Date October 5, 2001	TRANSMITTAL			ation Number	09/972,756			
Art Unit 1636				Date	October 5, 2001			
Examiner Name Vogel, Nancy T. Total Number of Pages in This Attorney Docket Number 021044-008020US Fee Transmittal Form x2	FORM			lamed Inventor	Katze, Michael G.			
Total Number of Pages in This Attorney Docket Number 021044-008020US	(to be used for all correspondence after initial filing)			it	1636			
Submission Discosure Statement Conference Confere				ner Name	Vogel, Nancy T.			
Fee Transmittal Form x2	•		Attorn	ey Docket Number	021044-008020US			
Fee Attached		ENC	LOSURE	S (Check all that apply	y)			
Amendment Petition Petition Petition Petition Power of Attorney, Revocation Proprietary Information Pr	Fee Transmittal Form x2	☐ Drawin	g(s)		☐ After Allowance Communication to Group			
After Final	Fee Attached	Licensi	ing-related Papers					
Affidavits/declaration(s)	Amendment	Petition	1					
Change of Correspondence Address Return Postcard Return	After Final				Proprietary Information			
Express Abandonment Request Request for Refund	Affidavits/declaration(s)	_	•		Status Letter			
Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s) Remarks The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430. Response to Missing Parts/Incomplete Application Response to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm or Individual Annette S. Parent Reg. No. 42,058 Signature Date CERTIFICATE OF MAILING I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below. Typed or printed name Karein	Extension of Time Request	☐ Terminal Disclaimer		imer				
Certified Copy of Priority Document(s) Response to Missing Parts/ Incomplete Application Response to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Or Individual Townsend and Townsend and Crew LLP Annette S. Parent Reg. No. 42,058 Signature CERTIFICATE OF MAILING I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below. Typed or printed name Karen Karlin	Express Abandonment Request				Return Postcard			
Response to Missing Parts/ Incomplete Application Response to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	☐ Information Disclosure Statement							
Incomplete Application Response to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm or Individual Annette S. Parent Reg. No. 42,058 Signature CERTIFICATE OF MAILING I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below. Typed or printed name Karen Karlin	1 							
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm or Individual Annette S. Parent Reg. No. 42,058 Signature CERTIFICATE OF MAILING I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below. Typed or printed name Karen Karlin	· · ·							
Firm or Individual Annette S. Parent Reg. No. 42,058 Signature CERTIFICATE OF MAILING I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below. Typed or printed name Karen Karlin	Response to Missing Parts							
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Date CERTIFICATE OF MAILING I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below. Typed or printed name Karen Karlin	Individual Annette S. Parent Reg. No. 42,058							
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addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below. Typed or printed name Karen Karlin	CERTIFICATE OF MAILING							
Signature Kaulin Date 1-28-04	Typed or printed name Karen Karlin							
	Signature	Ran	lin		Date 1-28-04			